



HIPAA Corner... ..

HIPAA: Good for Privacy, Bad for Business?

Although HIPAA is achieving its desired effect of protecting patient privacy and the security of protected health information, it is having unforeseen consequences that adversely affect the quality, safety, and cost of medical care for patients, *Medical News Today* reported May 29.

According to a paper by researchers from the University of Michigan Cardiovascular Center, published in the *Archives of Internal Medicine*, HIPAA is responsible for a significant drop off--from 96% to 34%--in the number of heart attack survivors and chest pain patients who complete follow-up surveys about their care. The authors, led by Kim Eagle, MD, clinical director of the cardiovascular center, also report that HIPAA has driven up the cost of conducting surveys and skewed their results.

"We won't solve safety, quality, and cost issues in healthcare unless we do quality research, and our findings show that HIPAA, as currently written, has the potential to hinder that effort," Eagle said. "Privacy is crucial. But quality-improvement research aims to generate public benefit, and as a society we have to be careful that we don't find ourselves on such a far extreme on one side of privacy protection that we actually paralyze our ongoing efforts to monitor and improve care."

Among the research team's specific complaints about HIPAA is that its language requires written consent for even those surveys that use anonymous data, *Medical News Today* reported. The group also said that HIPAA has changed the language in surveys to the point that they are several pages long and more complicated than ever.

DOJ Limits Privacy-Related Prosecutions

Although HIPAA's privacy rule allows the government to prosecute healthcare organizations for criminal violations of the rule, employees of these organizations are not automatically covered by the law and may not be subject to criminal penalties, according to the U.S. Department of Justice (DOJ).

The DOJ recently issued the opinion, which could stop federal prosecutors from pursuing some of the more than 13,000 complaints that have been filed alleging privacy rule violations. The DOJ's opinion was written June 1 by its Office of Legal Counsel in response to questions from the DOJ's criminal division and the Department of Health and Human Services.

To view the published opinion, go to:
http://www.usdoj.gov/olc/hipaa_final.htm



Important Information on Corporate Compliance

Q Are there certain security policies we must have in place to ensure security compliance?

A This is almost impossible to answer without actually performing an information risk analysis. You need to know what you're trying to protect, what you're trying to protect it from, and how you're going to protect it before you can implement effective policies.

I can say from experience that almost every organization needs policies that cover the following areas:

- System monitoring and maintenance
- Change management
- Remote access
- Server and workstation security
- Media disposal
- User authorization
- Termination
- Physical security
- Work with outside vendors

Editor's note: This question was answered by Kevin Beaver, CISSP. This is not legal advice. Consult with your facility's legal counsel for legal matters.

Group Identifies Roadblocks to Hispanic Mental Healthcare

On May 25, representatives from some of the leading public health agencies convened to discuss the barriers to information and treatment for Hispanic children with Attention-Deficit/Hyperactivity Disorder, according to a press release.

At a Capitol Hill briefing hosted by Children and Adults with Attention-Deficit/Hyperactivity Disorder (CHADD), 33 healthcare organizations, including the Centers for Disease Control and Prevention, the National Institute of Mental Health, and the American Psychiatric Association, cited the following factors as the primary obstacles of mental healthcare for Hispanics:

- The stigma associated with mental illness
- Lack of culturally competent services
- Language barriers
- Unemployment, financial difficulties, and lack of insurance
- Lack of awareness of mental health services

Read the entire article at:
http://www.prnewswire.com/news/index_mail.shtml?ACCT=104&STORY=/www/story/05-25-2005/0003689340&EDATE=

AHCCCS
Division of Health Care Management
Data Analysis & Research Unit
Encounter File Processing Schedule
July – August 2005

FILE PROCESSING ACTIVITY	July 2005	Aug 2005
Deadline for Corrected Pended Encounter and New Day File Submission to AHCCCS	Fri 7/8/2005 12:00 PM	Fri 8/5/2005 12:00 PM
Work Days for AHCCCS	7	7
Encounter Pended and Adjudication Files Available to Health Plans.	Tue 7/18/2005	Tue 8/15/2005
Work Days for Health Plans	17	14

NOTE:

1. This schedule is subject to change. If untimely submission of an encounter is caused by an AHCCCS schedule change, a sanction against timeliness error will not be applied.
2. Health Plans are required to correct each pending encounter within 120 days.
3. On deadline days, encounter file(s) must arrive at AHCCCS by 12:00 p.m., Noon, unless otherwise noted

Edit Alerts

An Edit Alert is a faxed and e-mailed notice of system enhancements or changes. The Office of Program Support strives to ensure any system enhancements or changes are communicated to all program participants in an accurate and reliable manner. Edit Alerts will be distributed when the information is first made available and again with the following monthly publication of the Encounter Tidbits.

SSR 1235 - H270 Pend Deletions

H270 – AHCCCS has acknowledged there is a mapping issue causing encounters to fail the H270 edit and pend. For this reason, the Office of Program Support (OPS) created SSR 1235 which will permit IT to mark all H270 pends for delete. Once the malfunction at AHCCCS has been corrected, the Office of Program Support will ensure the encounters are resubmitted.

The OPS wants to remind the RBHAs to monitor the age of pended encounters. In recent months, there has been a steady increase in the amount of pends listed as greater than 90 days. Please research and take appropriate action on encounters that are approaching the 90-day threshold.

**Coding Q & A**

Q If a client has state benefits and private insurance, does the state pay first, or are the private insurance benefits exhausted first?

A According to the Provider Manual, private insurance benefits are exhausted before the state provides payment. Page 3.5-4 states: "ADHS/DBHS and the RBHA must be the payers of last resort for Title XIX/XXI covered services".

AHCCCS Encounters Error Codes**P580 – Prescribing Provider Not On File**

Encounters will pend when submitted for pharmacy services when the prescribing provider is not an AHCCCS provider on the date of service. RBHAs can verify enrollment in PMMIS using screen, PR070 – Provider Enrollment Status. Further, the RBHA should also verify the category of service using PMMIS screen PR035 – Categories of Service.

N004 – NDC Code not on File

Effective for the February cycle, valid Redbook or MediSpan National Drug Codes (NDC) encounter read has been implemented. If pharmacy encounters are pending for this error code, verify the NDC's are valid Redbook or MediSpan codes. If valid, submit the information to your assigned technical assistant.

Z805 – Exact Duplicate from Different Health Plans (Form C)

Encounters are pending because at least one claim was found in the system from another health plan that matches the pended claim. These claims must be researched by both health plans' to determine the cause for the exact duplicate. Each health plan must work together to resolve the issue and decide who should receive payment for the service. Your assigned technical assistant is available to help you with your research.

P580 – Prescribing Provider Not On File	41,239
N004 – NDC Code not on File	32,337
Z805 – Exact Duplicate from Different Health Plans	8,694
Total	82,270



These errors account for 71.08% of the pended encounters at AHCCCS.

User Access Request Forms

The Office of Program Support Services must authorize all requests for access to CIS, Office of Human Rights, Office of Grievance and Appeals, Issue Resolution System, and PMMIS (AHCCCS) databases. In order to obtain access to any of these databases, please fax or mail a copy of the appropriate User Access Request Form and User Affirmation Statement to Stacy Mobbs at (602) 364-4736.

For questions or more information, please contact Stacy Mobbs by telephone at (602) 364-4708 or by e-mail at mobbss@azdhs.gov



Welcome !!
Cenpatico Behavioral Health of Arizona!

Concerns about Violence Among Dementia Sufferers Grow

Published March 2004

The number of homicides and violent behavior related to dementia may increase as the population ages and the number of people suffering from dementia goes up, a professor of aging and mental health told Gannett News Service. Last week, experts told the Senate Special Committee on Aging that up to 700,000 of the nation's four million elderly with dementia become violent each year. The number of people suffering from Alzheimer's disease and other dementia is expected to increase from four million in 2002 to 16 million by 2050, University of South Florida Professor Donna Cohen said. She recommended banning firearms from Alternative Living Facilities (ALF), and training law enforcement and health professionals to the possible dangers of violence among elderly dementia sufferers. Meanwhile, an 83-year-old resident of the Atrium--a Danvers, MA-based ALF that cares for people with Alzheimer's and memory disorders--was killed last week, according to The Boston Globe. The man died after a fellow resident allegedly knocked him down. One expert said the vast majority of dementia-related violence occurs against caregivers at home and in ALFs, but is brief and does not result in serious injury. The number of dementia-related homicides is not known, but is probably low, Cohen told Gannett.

Office of Program Support Staff

If you need assistance, please contact your assigned Technical Assistant at:

Michael Carter	Excel NARBHA Cenpatico	(602) 364-4710
Eunice Argusta	CPSA-3 CPSA-5 Gila River Navajo Nation Pascua Yaqui	(602) 364-4711
Javier Higuera	PGBHA Value Options	(602) 364-4712
